FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

MAR - 1 2004

OMB APPROVAL					
MB Number:	3235-0076				

SEC U	SE ONLY
Prefix	Serial I
DATER	RECEIVED

1135746

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amenda Salesnet, Inc Sale of Series F Convertible Pr	nent and name has changed, and indicate change.) eferred Stock	- FSED
Filing Under (Check box(es) that apply): ☐ Rule Type of Filing: ☐ New Filing ☐ Amer) U OT bik O C FOR
	A. BASIC IDENTIFICATION DATA	MAR 02 2004
1. Enter the information requested about the issu	er	THOMSON
Name of Issuer (☐ check if this is an amendmer Salesnet, Inc.	nt and name has changed, and indicate change.)	FILMANCE
Address of Executive Offices 580 Harrison Avenue, Boston, MA 02118	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) (617) 350-0160
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Development, integration and management of	software and consulting services.	
Type of Business Organization		
•	☐ limited partnership, already formed ☐ limited partnership, to be formed	other (please specify):
Actual or Estimated Date of Incorporation or Org Jurisdiction of Incorporation or Organization:	ganization: Month Year 0 0 (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	B Actual ☐ Estimated Estimated D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTIF	FICATION DATA			
2. Enter the information request	ed for the following	g:				
 Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; 						
*			ate general and managing pa	rtners of partnership is	ssuers; and	
	<u> </u>	Beneficial Owner		□ Director	General and/or Managing Partner	
Full Name (Last name first, if indiv Doyle, Michael	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter 🗵	Beneficial Owner		□ Director	General and/or Managing Partner	
Full Name (Last name first, if indiv Tang, Jonathan	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter 🛛	Beneficial Owner	☐ Executive Officer		☐ General and/or Managing Partner	
Full Name (Last name first, if indi- DeNuccio, Kevin	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner	
Full Name (Last name first, if indis Stofer, Kermit	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer		General and/or Managing Partner	
Full Name (Last name first, if indiv Baum, David	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter 🛛	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if indi- Perkett, Richard	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter 🛛	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, if indiv Tang, Eric Bruce	vidual)					
Business or Residence Address (N c/o Salesnet, Inc., 580 Harrison A						
Check Box(es) that Apply:	Promoter 🗵	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, if indiv Interpacific Fund M	vidual)					
Business or Residence Address (No C/o Salesnet, Inc., 580 Harrison A						

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Benz, Peter T.	f individual)				
Business or Residence Addre c/o B1 Coastal Consulting (94402		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Prism Venture Partners III					
Business or Residence Addre Westwood Executive Center			twood, MA 02090		
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Phoenix Investment Partne	rs				,
Business or Residence Address 56 Prospect Street, Hartfor		eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Prism Venture Partners III	-A, L.P.				
Business or Residence Addre Westwood Executive Center			twood, MA 02090		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Phoenix Life Insurance Co	mpany				
Business or Residence Address Frospect Street, Hartfor		eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Matteodo, Maurice					
Business or Residence Addre c/o Salesnet, Inc., 580 Harr	ison Avenue, Bosto	n, MA 02118			
Check Box(es) that Apply: Full Name (Last name first, i	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
The PMG-NG Direct Inves Business or Residence Addre	tment Fund, L.P.	eet. City. State. Zip Code)			
10 South Wacker Drive, Su Check Box(es) that Apply:			☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, i		M Delicited Owner			Managing Partner
Special Private Equity Part		City Cody			
Business or Residence Addre 10 South Wacker Drive, Su		IL 60606			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i		not City State 7in Call			
Business or Residence Addre	ess (ivumoer and Str	cei, City, State, Zip Code)			

	· · · · · · · · · · · · · · · · · · ·				В.	INFORMA	ATION ABO	UT OFFER	ING				
1.	Has the	issuer sold,	or does the	e issuer inte	nd to sell, to	non-accre	dited investo	rs in this offe	ring?				Yes No
					Answer als	so in Appen	dix, Column	2, if filing u	nder ULOE.				
2.	What is	the minimu	ım investm	ent that wil	l be accepte	d from any	individual?						\$ <u>N/A</u>
3.	Does th	e offering p	ermit joint	ownership	of a single u	nit?		***************************************		***************************************			Yes No □ 🗵
4.	similar to be list list the	remunerati sted is an ass name of the	on for so sociated po broker or	licitation of erson or a dealer. I	f purchaser gent of a l	rs in conne broker or c n five (5)	ection with dealer regist persons to	sales of se ered with th	directly or in curities in to the SEC and the associated	he offering or with a	. If a state or	person states,	
Full N/A		Last name fi	rst, if indiv	ridual)									
Bus	iness or I	Residence A	ddress (Nu	ımber and S	Street, City,	State, Zip C	ode)						
Nan	ne of Ass	ociated Bro	ker or Dea	ler									
Stat	es in Wh	ich Person l	Listed Has	Solicited or	Intends to S	Solicit Purch	nasers						
	(Check [AL] [IL] [MT] [RI]	"All States' [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual S [AR] [KS] [NH] [TN]	tates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]
Full	Name (I	ast name fi	rst, if indiv	ridual)									
Bus	iness or I	Residence A	ddress (Nu	ımber and S	Street, City,	State, Zip C	Code)	<u>:</u>	<u>.</u>				
Nan	ne of Ass	ociated Bro	ker or Dea	ler							· · · · · · · · · · · · · · · · · · ·		
Stat	es in Wh	ich Person I	Listed Has	Solicited or	Intends to S	Solicit Purch	nasers			 			
	(Check [AL] [IL] [MT] [RI]	"All States' [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual S [AR] [KS] [NH] [TN]	tates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]
Full	Name (I	ast name fi	rst, if indiv	ridual)									
Bus	iness or I	Residence A	ddress (Nu	imber and S	Street, City,	State, Zip C	Code)						
Nan	ne of Ass	ociated Bro	ker or Dea	ler									
Stat	es in Wh	ich Person I	isted Has	Solicited or	Intends to S	Solicit Purch	nasers	 					
	(Check [AL] [IL] [MT] [RI]	"All States' [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual S [AR] [KS] [NH] [TN]	tates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security Debt	Aggregate Offering Price		Amount Already Sold
		\$0	\$ <u>0</u>	
	Equity - Shares of Series F Convertible Preferred Stock	\$ <u>10,000,178.00</u>	\$ <u>10</u>	0,000,178.00
	□ Common ☑ Preferred			
	Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>	
	Partnership Interests	\$0	\$ <u>0</u>	
	Other (Specify)	\$0	\$ <u>0</u>	
	Total	\$ <u>10,000,178.00</u>	\$10	0,000,178.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indi-cate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$ <u>1</u> !	0,000,178.00
	Non-accredited Investors	0	\$ <u>0</u>	·
	Total (for filings under Rule 504 only)			
	Answer also in Appendix, Column 4, if filing under ULOE.		_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	N/A	•	0
	Regulation A	N/A	\$	0
	Rule 504		\$ \$	
		N/A		0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	N/A	\$_	
	Transfer Agent's Fees		\$_	
	Printing and Engraving Costs		\$_	
	Legal Fees	\boxtimes	\$8	0,000.00
	Accounting Fees		\$_	
	Engineering Fees		\$_	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify)		\$	
	Total	\boxtimes	\$80	0.000.00

	C. OFFERIN	IG PRICE, NUMBER OF INVESTORS, EXPE	NSES AND USE (OF PROCEEDS	
1	total expenses furnished in response t	ggregate offering price given in response to Part C o Part C - Question 4.a. This difference is the "adj	usted gross		\$ <u>9,920,178.00</u>
1	of the purposes shown. If the amour	usted gross proceeds to the issuer used or proposed it for any purpose is not known, furnish an estimat of the payments listed must equal the adjusted groups Question 4.b above.	e and check the box	(
				Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees			\$	☐ \$
	Purchase of real estate			\$	☐ \$
	Purchase, rental or leasing and in	stallation of machinery and equipment		\$	□ \$
	Construction or leasing of plant b	uildings and facilities		\$	□ \$
	Acquisition of other businesses (imay be used in exchange for the	ncluding the value of securities involved in this off assets or securities of another issuer pursuant to a n	fering that nerger)	\$	□ \$
	Repayment of indebtedness		⊠	\$	\$5,400,178.08
	Working capital		🛛	\$	⊠ \$ <u>4,519,999.92</u>
	Other (specify):			\$	\$
	Column Totals		⊠	\$	⋈ \$ <u>9,920,178.00</u>
	Total Payments Listed (column to	otals added)		⊠ \$9	,920,178.00
		D. FEDERAL SIGNATUR	 E		
follo	wing signature constitutes an und	e to be signed by the undersigned duly authoritating by the issuer to furnish to the U.S d by the issuer to any non-accredited investor pursue.	. Securities and I	Exchange Commission	nder Rule 505, the , upon written re-
	er (Print or Type) snet, Inc.	Signature Ac	Date Febru	uary <u>27</u> , 2004	
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type) President and Treasurer			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)